

## **A Surgical Artist at War: the Paintings and Sketches of Sir Charles Bell 1809–1815**

M K H Crumplin, P Starling

96 pp Price £14.99 ISBN 0-95-46-2131-X (p/b)

Edinburgh: Royal College of Surgeons of Edinburgh

Born into a respectable Scottish family in 1774, Charles Bell was an accomplished anatomist, surgeon, physiologist, author and artist. His highly successful civil medical career coincided with the Revolutionary and Napoleonic Wars of 1792–1815. In early 1809, Sir John Moore's Peninsular Army landed on the South Coast following the desperate retreat to Corunna. About 28 000 ill and wounded soldiers disembarked, causing consternation in the local population. The army medical services were overwhelmed and Bell was among a number of civilian surgeons who volunteered to help. He performed a similar altruistic service 6 years later in the aftermath of the Battle of Waterloo where 55 000 dead and wounded were left on the field. These sudden transitions from civilian to military surgery were not straightforward and Bell's operation results in the Brussels hospitals were not impressive. Only one of his 12 amputation cases survived—a mortality rate of 92% which was high even allowing for the more hazardous nature of secondary operations which had had to be delayed long after the initial injury.

Bell's artistic skills were more adaptable and he made sketches and paintings of both the Corunna and Waterloo wounded and post-surgical cases. It is these unique illustrations that have been expertly gathered together in this very attractive book produced by the Royal College of Surgeons of Edinburgh. Medical readers may be familiar with some of the Waterloo images but the earlier Corunna paintings are very little known and their wider circulation is long overdue. The authors, one a retired surgeon and current curator of surgical instruments and the other a curator of the Army Medical Services Museum, are very well qualified to describe Bell's paintings and to provide the historical background. The 15 Corunna and 16 Waterloo paintings are superbly reproduced as colour plates. The chronological ordering gives at once an immediate impression of the artist's talent and a sense of how his style evolved between the two campaigns. The great strength and appeal of this project is the intelligent combination of the painstakingly detailed pictures and the contemporary comments of Bell and his colleagues with a perceptive modern surgical commentary. The latter is of sufficient detail to inform a surgeon but well enough explained to engage an intelligent lay reader (or physician). The authors refer to Bell's paintings as rare 'photographs' of the Napoleonic Wars. They are certainly a powerful antidote to the ubiquitous glamorizing salon paintings of the

era. I unreservedly recommend this work to all with any interest in medical and military history.

**Martin R Howard**

Wilberfoss, York, UK

## **Drug Discovery—A History**

Walter Sneader

468 pp Price £34.95 ISBN 0-471-89980-1 (p/b)

Chichester: John Wiley

I must thank Dr Kamran Abbasi for inviting me to review this book because if I had seen it on the shelf in a bookshop I would almost certainly have passed it by; and, in doing so, I would have missed a book of great merit and considerable scholarship. The book deals first with those drugs from historical eras, then with those derived from naturally occurring precursors and prototypes and finally with the wholly synthetic drugs. In general this arrangement works well for a history of the discovery of drugs—which is, of course, the purpose of this book—though it does produce some rather odd bedfellows; for example, the section on oral rehydration is followed by one on disinfectants. It is less satisfactory for those who wish to read about the history of the different drugs used in the treatment of certain diseases such as asthma or diabetes because the reader must flip continually from one section and from one chapter to another, and also because it is less easy to understand the relative importance of different groups of drugs as the treatment of those diseases has evolved over time.

However, as a history of the discovery of individual drugs and of categories of drugs this book is excellent. Sneader writes fluently and lucidly, his research has been scrupulous and his evaluation of the data is appropriately critical. The book abounds with pertinent original references, and not just to the drugs themselves; if you want to lay your hands on the seminal references to the work by Goldblatt and his colleagues on the role of renin in renal hypertension in 1934 or on Ahlquist's concept of alpha and beta adrenoreceptors in 1948 you will find them here. There are also first-class vignettes on such topics as the Paracelsians, Brunonianism and pneumatic chemistry, to mention only a few. Readers will also learn, if like me they did not already know, how Horace Walpole introduced the word 'serendipity' (from the three princes of Serendip who had repeatedly made fortuitous discoveries) and how the discovery by Henry Salter, a London physician, that strong black coffee could relieve asthma, was later to lead to the finding that theophylline was a bronchodilator. And there are many more such anecdotes. Inevitably there are omissions though all are of a minor nature and largely a matter of personal choice. I was disappointed that the chapter on herbals mentions only those which appeared in

printed formats, effectively therefore just those published after 1480. Although the earlier manuscript herbals inevitably had a more limited circulation, they did still have a substantial impact on medical practice. This was especially true of those written in the vernacular, such as the English translation in 1373 by John Lelamour, a schoolmaster in Hereford, of a Latin herbal, a work which also served as one of the earliest English texts on gardening. Those with connections to the Scottish capital city will read the comprehensive section on the use of Dakin's solution as an antiseptic and will then ponder the omission of any mention of *Edinburgh University Solution Of Lime (Eusol)*, until they remember that the author is based in Glasgow.

For most people this will not be a book to read from cover to cover but one into which they will dip repeatedly with pleasure and profit. It will probably be used primarily as a reference book and it does have the essential accompaniment of any such work, namely an excellent index; albeit one in a font size so small as to trouble the eyes of some older readers.

**Henry Connor**

1 Vineyard Road, Hereford HR1 1TT, UK

## Doctors as Patients

Editor: Petre Jones

200 pp Price £24.95 ISBN 1-85775-887-0 (h/b)

Oxford: Radcliffe Publishing

Few will read this book for enjoyment, though some might read it as a lifeline in time of trouble. *Doctors as Patients* emerges from the Doctors' Support Network [www.dsn.org.uk], a self-help organization run by and for doctors who have experienced mental illness. The proceeds go to the organization and its history is recounted here (in Chapter 27). In 28 chapters, a third of them authored or co-authored by the editor, accounts are provided either of the phenomenology of mental illness itself (most often an affective or eating disorder) or the practical information that a suffering medic might need (e.g. on employment law and antidiscriminatory legislation). Though the book contains contributions from 24 authors, two are identified solely by their initials and nine as simply 'Anon'. These features are perhaps indicative enough of the book's central thesis—that there is something different about being a doctor in difficulty. There is also a noticeable preponderance of general practitioners, giving rise to pertinent chapters on the business aspects of practices and partnerships.

Though the authors emphasize the value of support and mutual respect, and the importance of knowing that others 'are there' for one, what emerges most forcibly is the central loneliness that afflicts those who are ill. Whether it is consequent upon that shame associated with such illness,

the blow to the career anticipated, or all the sheer complexity of the hoops to be jumped through in order to receive adequate treatment (from those whom one might trust), the feeling identified by many of these doctors is the rejection coming down the track—from colleagues, friends and maybe even family. And, at the end of the line, there is the General Medical Council with an impersonal letter and its seeming conflation of (mental) illness with immorality.

Yet it would seem that by the time others are kicking the professional when they are down, they (the professional) have already started to dissect themselves:

'When a doctor questions their ability to practise medicine, they are not only questioning their ability to earn a living, they are questioning who they are, their identity, and everything they believe about themselves.'—Lizzie Miller, p. 147

Indeed, the book is a *pot-pourri* of autobiographical accounts of suffering and partial redemptions, notes to the wise for others (e.g. always have adequate health insurance) and notes to the self in case of future danger:

'My warning signs . . .

- Bursting into tears between patients
- Crying in the car between home visits
- Feeling that I cannot think in a straight line
- Finding decisions almost impossible to make
- Thinking about self-harm and finding where the scalpels are kept'—Anon. p. 110

This is not a perfect book; the organization of the chapters bounces in all directions, typos accrue towards the end, and some voices are perhaps a little too prominent, but it contains some terrific poetry (most of it too extended for citation here), including Anon's 'The rope' (p. 95) and Joanne Watson's 'Weekend on call' (p. 97). Some of those writing, like the Anon who authored 'Lithium' (p. 99) appear to be doing so post-medicine: Here are the last two of eight stanzas.

'And the job is a role  
I took on, long ago.  
It is not who I am,  
Just the person you know.

So keep your pills  
And let me go free.  
No longer a doctor  
But created to be.'

This is a book you'll hope you never need.

**Sean A Spence**

Academic Clinical Psychiatry, Division of Genomic Medicine, University of Sheffield, The Longley Centre, Norwood Grange Drive, Sheffield S5 7JT, UK